

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 2
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) ARIZONA GRASSROOTS ACTION PAC		FEC IDENTIFICATION NUMBER ▼ C C00558445	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: space-around; width: 100%;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div>	

Full Name of Payee Connect Strategic Communications LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 04 / 2015		
Mailing Address PO Box 141251			Amount 2772.74		
City Dallas	State TX	Zip Code 75214	Transaction ID : SE.4831		
Purpose of Expenditure IE-Oppose Kelli Ward-Online Ads		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 04 / 2015		
Name of Federal Candidate KELLI WARD			Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> Senate State: AZ		
Calendar Year-To-Date Per Election for Office Sought 2772.74			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee East Meridian Strategies LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 23 / 2016		
Mailing Address 219 East Taylor Run Pkwy			Amount 14029.51		
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.4836		
Purpose of Expenditure IE-McCain-Direct Mail		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 02 / 23 / 2016		
Name of Federal Candidate JOHN S MCCAIN			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AZ		
Calendar Year-To-Date Per Election for Office Sought 22302.25			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	16802.25
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Lisa Lisker

[Electronically Filed]

Date

 MM / DD / YYYY
02 / 25 / 2016

Signature